

those others on the market. He stated the SU-35, as made by the Russians, is on the market right now, the open market. It is for sale. Anyone can buy it—Iraq, Iran, Syria, Libya, anybody else—and it is better than anything we have, including the F-15 and the F-16.

We have to face up to this. It is a threat from the conventional side as well as from missiles.

I will make one comment about the missiles. Again, we hang this on President Clinton. In that same veto message in 1993, President Clinton said: I'm vetoing this bill. And I'm vetoing it because it has money in it for a national missile defense system, which we do not need because there is no threat out there. Yet we knew from our intelligence that the threat would be there and imminent by fiscal year 1998. And sure enough, it was.

So here we are with the combination of all these countries out there that have every kind of weapon of mass destruction: Biological, chemical, or nuclear. Yet we have countries such as China and Russia and now North Korea that have the capability of delivering those warheads to anywhere in America right now, when we are in Washington, DC. They could fire one from North Korea that would take 35 minutes to get here. There is not one thing in our arsenal to knock it down because this President vetoed our national missile defense effort.

Now the American people have awakened to this, and we have enough Democrats who are supporting Republicans to rebuild our system and to try to get a national missile defense system deployed. Unfortunately, it couldn't happen for another 2 years, maybe 2½ to 3 years.

That gets around to the Comprehensive Test Ban Treaty about which my distinguished colleague from Illinois was talking. I think probably the best thing that could have happened to us for our national security was to defeat that. If we don't have a national missile defense system, then what do we have to deter other countries from launching missiles at the United States?

What we have is a nuclear stockpile. We have nine weapons in the nuclear stockpile. Because of the President's moratorium, they haven't been tested for 7 years. We don't know whether or not they work. I suggest it might be better not even to have nuclear weapons than to have weapons but not know whether they work. That is exactly what we have right now. If we had passed the Comprehensive Test Ban Treaty, there would be no verification, there would be no way in the world we would have known whether or not our stockpile was working because they hadn't been tested.

I can remember quote after quote after quote by the people who were so much involved in this from our energy

labs. They all said—I had the quotes; I don't have them in front of me right now—that if we can't test these nuclear weapons, there is no way we can determine whether or not they work. It is a very unsafe thing for America. These were the directors of the labs responsible for this nuclear arsenal.

So of the nine weapons we have, which I have listed here, we only have one we have adequately tested enough to know whether or not it would work. That is the W-84 warhead that we know would work.

This would have been a real disaster for America. People kept saying President Eisenhower was for a comprehensive test ban treaty, that President Bush was, that President Reagan was. That isn't true at all. This flawed treaty was a zero-yield treaty. We would only have had the word of our adversaries that they would not test their nuclear arsenals.

We keep our word in America; we don't test our arsenal. But we don't have any idea whether or not they are going to test theirs. In fact, during the course of the debate, both China and Russia said they would not comply with the zero yield. There is no way in the world we can detect that, that we would know what our adversaries were doing. That would, for all practical purposes, be unilateral disarmament.

I am asked back in Oklahoma by people who have good street sense, why is it the liberals in Congress are so committed to disarming our country, to taking our money that we are supposed to have to defend America and putting it into these various discretionary social programs? I have to explain to them that the people in Washington, and some of the Senators in this Chamber, are not like the people of Oklahoma. I think President Clinton honestly believes that if we all stand in a circle and hold hands and we unilaterally disarm, everyone will love each other and it won't be necessary to have a defense system.

That is what we are up against. In a very respectful way, I have to disagree with many of the things my distinguished colleague from Illinois stated.

I think we have had a very successful session. We have ensured a sound Social Security retirement system. We have improved educational opportunities for our children. Along this line, the major disagreement we had was that the Democrats thought the decisions should be made here in Washington; Republicans want to use the same amount of money but not make the decisions in Washington but send that money to the school districts. The school board in Tulsa, OK, is much better equipped to know what their education needs are in Oklahoma than we are in this August body of the Senate. The Democrats say the answer is not school buses, not computers, not the physical facilities that are available; it

is 100,000 teachers. I think the more we can send these decisions back to the local level, the better the people of America will be served.

I believe we have had a good session. I am not pleased with the way it is turning out right now. The old saying we have heard so many times in the past that there are two things you never want to watch while they are being made—one is sausage and the other is laws—becomes very true during the last few days of legislative sessions.

I think we have done a very good job. I think we did the right thing in defeating the unverifiable test ban treaty. I think we have passed legislation of which America will be very proud. I am anxious to end all this fun we are having and go home and tell the people in Oklahoma about it.

I yield the floor and suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. BUNNING). The clerk will call the roll.

The legislative assistant proceeded to call the roll.

Mr. INHOFE. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

#### EXTENSION OF MORNING BUSINESS

Mr. INHOFE. Mr. President, I ask unanimous consent that the period for morning business be extended to the hour of 2 p.m. and that the time be equally divided in the usual form.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. INHOFE. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative assistant proceeded to call the roll.

Mr. HATCH. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. HATCH. Mr. President, I ask unanimous consent that for the next quorum call the time be divided for each side equally.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. HATCH. I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The legislative assistant proceeded to call the roll.

Mr. WYDEN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. WYDEN. Mr. President, I ask unanimous consent to speak for up to 15 minutes in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. WYDEN. Thank you, Mr. President.

#### PRESCRIPTION DRUGS FOR THE ELDERLY

Mr. WYDEN. Mr. President, I have come to the floor of the Senate on a number of occasions recently to talk about the issue of prescription drugs for the elderly.

I think there is a particularly relevant point to make this afternoon given the very extensive press coverage we have seen on this issue in recent days.

Over the weekend, David Rosenbaum in the New York Times had an excellent article on the issue. In the last couple of days, Time magazine had another very lengthy piece on the question of prescription drugs for seniors. And both of these articles ultimately make the point that Congress probably is not going to be able to agree on legislation during this session. The authors offer considerable skepticism about the ability of Congress to come together on a very difficult issue. Both of them, to some extent, go off into what I think are secondary questions—the questions of the role of the Internet, and the question of patents on drugs. Those are important matters.

But what is central and what the Congress needs to do on a bipartisan basis is pass legislation that would make it possible for frail and vulnerable older people to get insurance coverage that would provide for their medicine.

For example, if you are an elderly widow who is 78, maybe having early signs of Alzheimer's, and you spend more than half of your combined monthly income of Social Security and pension on prescription medicine—those are the kinds of letters that seniors are sending to me—it is not going to help you a whole lot to get a 10- or 15-percent discount because you shop over the Internet. Certainly, the role of the Internet in prescription drugs is going to be important. There will be a lot of issues. But to provide relief for the Nation's older people, what Congress needs to do on a bipartisan basis is pass legislation that provides insurance coverage making it possible for older people to pay these big bills. Patent issues and the question of the Internet are matters that are important, but what is needed is legislation that provides real relief.

Part of the effort to win bipartisan support for prescription drug legislation is coming to this floor and, as the poster says, urging seniors to send in copies of their prescription drug bills. Send them to each of us here in the Senate in Washington, DC.

I intend to keep coming to the floor of the Senate and actually reading

from these letters. I have three today that I think tell an important story.

One is from a senior citizen in Medford, OR, in my home State. Another is from a senior citizen from Grants Pass, OR, and a third is from a senior citizen in O'Brien, OR, all of which reflect the kind of concerns I know are out there. Hopefully, as seniors learn about our campaign and see that we are urging them to send us copies of their prescription drug bills, it can help bring about bipartisan support for legislation in the Senate.

I am very proud that I have been able to team up in recent months with Senator OLYMPIA SNOWE on bipartisan legislation. I have been of the view that nothing more can happen in Washington, DC, unless it is bipartisan. The Snowe-Wyden legislation is a bill that uses marketplace forces and unleashes the forces of the private sector in an effort to make medicine more affordable for the Nation's older people.

What is sad is that our elderly are in effect hit by a double whammy. Millions of them can't afford their prescriptions. Medicare doesn't cover medicine. It hasn't since the program began in 1965.

On top of the fact that seniors don't have Medicare coverage, when they walk into a pharmacy—I see our friend from New Hampshire, our colleague who has a great interest in health care. As he knows, when a senior walks into a drugstore in New Hampshire, Oregon, or Kentucky, and can't pay for their prescription medicine, in addition they are subsidizing the big buyers of prescription drugs. The HMOs and the health care plans are in a position to negotiate a discount. They get a break on their prices. The seniors, people who are spending half their monthly income on prescriptions, are, in effect, subsidizing those big buyers.

The bipartisan Snowe-Wyden legislation, fortunately, has been able to generate a lot of interest in the Senate. Senator SNOWE and I are proud to have the support.

For example, more than 54 Members of the Senate—more than half the Senate—are now on record saying they would support a tobacco tax to pay for prescription drug benefits for older people. That strikes me as appropriate.

Medicare spent more than \$12 billion last year picking up the costs of tobacco-related illnesses, and more than 50 Members of the Senate are now on record as saying they would be willing to support additional funding to help the vulnerable seniors from whom we are hearing.

Let me read a little bit from some of these letters because I think they sum it up. One I received in the last couple of days from Grants Pass says:

No way can I afford to pay for my medicine. I did get a refill on Pepcid.

That is an important medication this elderly woman is taking now in Grants Pass, OR.

I do hope you can do something to help us seniors.

When she writes, "No way can I afford to pay for my medicine," that essentially sums it up.

We can talk about people buying prescription drugs over the Internet; we can talk about the patent issue, both involving substantial sums of money. Whatever that person needs in Grants Pass—and the letter goes on to say she has no insurance coverage for her medicine—seniors need legislation that actually provides coverage through the insurance system to help pay for prescription drugs.

Another letter comes from Medford, OR. We can see the stack of bills going to a pharmacy in Medford, Southern Oregon Health Trust Pharmacy. This individual has spent \$1,664 recently on prescription drugs in Medicare. She is sending bills to our office. Unfortunately, she doesn't get any help through the various insurance coverages she has. This is representative of what we have been hearing. She also goes on to point out that this large stack of bills she sent me does not even include some of the over-the-counter drugs she is taking such as ibuprofen.

These cases illustrate very well why our country cannot afford not to cover prescription medicine. All of these articles, including Time magazine, are always questioning whether the Nation can afford to cover prescription medicine. I have contended for some time now we cannot afford not to cover prescription medicine. These bills I have been reading from on the floor of the Senate show seniors can't afford drugs that help to lower cholesterol, help to lower their blood pressure. These are drugs that help older people to stay well.

Prescription drug coverage for seniors has been a priority ever since my days with the Gray Panthers before I was elected to Congress. Frankly, it is much more important today than ever because these drugs that so many seniors write that they cannot afford today help seniors to stay well. The variety of anticoagulant drugs that help to prevent strokes, as I have commented on the floor of the Senate in the past, might cost \$1,000 a year for an older person to buy them to stay healthy. Compare that to the costs incurred if a senior suffers a stroke. If a senior cannot get an anticoagulant drug to help stay healthy and avoid a stroke, that senior might incur expenses of more than \$100,000.

The question for the Senate is, Are we going to help frail and vulnerable seniors with prescription drug coverage that will cost just a fraction of the expenses that will be incurred through Medicare Part A, the hospital portion, and Medicare Part B, the outpatient portion, if the senior cannot get help and ends up getting sick and, very often, incurring extraordinary expenses?